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	Effective on 12/08/2004.							
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).								
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v_{I}	FEE TRANSMITTAL							
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	For FY 2005							
	2000							
E7	Applicant claims small entity status. See 37 CFR 1.27							
G5/-1								

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Complete if Known						
Application Number	10/663,747					
Filing Date	September 17, 2003					
First Named Inventor	Mamoru FUJIEDA					
Examiner Name	Johnny H. Hoang					
Art Unit	3747					
Attorney Docket No.	056207.49682D1					

TOTAL AMOUNT OF PA	AYMENT (\$) 1810.00		Attorney Docket	No. 05	6207.49682D1					
METHOD OF PAYMENT (check all that a	ipply)			· · · · · · · · · · · · · · · · · · ·						
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): ☐ Deposit Account Deposit Account Number: 05-1323 (Docket No. 056207.49682D1) Deposit Account Name: 23911 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
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FEE CALCULATION	. AND EVALUE	NATION FEED					<u> </u>				
1. BASIC FILING, SEARCH	-		CEAE	OU FEE	CVARANI	ATION FEED					
	FILING F	Small Entity	SEARCH FEES Small Entity		EXAMINATION FEES Small Entity						
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)				
Utility	300	150	500	250	200	100					
Design	200	100	100	50	130	65					
Plant	200	100	300	150	160	80					
Reissue	300	150	500	250	600	300					
Provisional	200	100	0	0	0	0					
2. EXCESS CLAIM FEES											
							Small Entity				
Fee Description				un de un entetent e	4 4	Fee (\$)	Fee (\$)				
·	Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100										
· ·		eissues, each in	aepenaent	ciaim more than in	the onginal i	patent 200 360	100 180				
Multiple dependent claim		PT . (B)	5 0	-14 (6)							
Total Claims -20 or HP	Extra claims	Fees(\$)	- Fee P	aid (\$)	<u>Mu</u>	Itiple Dependence Cla Fee(S)					
HP = highest number of total cla	aims paid for if a	reater than 20				ree(3)	Fee Paid (\$)				
Indep. Claims	Extra claims	Fees(\$)	Fee P	aid (\$)			***				
- 3 or HP HP = highest number of total cla	-1	×	-								
•		reater than 3									
3. APPLICATION SIZE I						£405 for a second or eller					
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
Total Sheets											
4. OTHER FEES							F B				
Fee Paid (\$) Petition for Extension of Time (3 mos.) \$1020.00											
Petition for Extension of Time (3 mos.) Other: Request for Continued Examination (3 mos.) \$790.00											
SUBMITTED BY											
	7) - 11	1	11	Registration No.							

James F. McKepwall SUNDENDICK Telephone (202) 624-2500
Date January 23, 2006 (Attorney/Agent) 25,406 Signature Name (Print/Type)

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